P07000100447

(Re	questor's Name)	
(Ad	dress)	
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(Address)		
(Cit	y/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	☐ MAIL
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(Bu	siness Entity Nar	ne)
	cument Number)	
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Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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FILED

2009 JUL 20 AH II: IL

SECRETARY OF STATE
TALLAHASSEF, FI ORIO.

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COVER LETTER

Division of Corporations
SUBJECT: DISSULUTION NULAJONING
DOCUMENT NUMBER: P0700100 447
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
FRANK PONTORIFRO (Name of Contact Person)
NULAUEN TUC (Firm/Company)
12 A F 70 A PIACE (Address)
BOYNTON PEACLY FL 33426 (City/State and Zip Code)
For further information concerning this matter, please call:
Trank Ponto (1850) at (973) 508 2449 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$43.75 Filing Fee & \$\bigcup \\$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

TALLASTAS AM 11: 14
bmits the Ballowing

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the belowing articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

SECOND: The document number of the corporation (if known): $\frac{P_07000100447}{1000447}$ THIRD: The file date of the articles of incorporation: $\frac{9-7-07}{100047}$

FOURTH: (CHECK AT LEAST ONE BOX)

None of the corporation's shares have been issued.

The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

A majority of the incorporators authorized the dissolution.

A majority of the directors authorized the dissolution.

Signature:

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Typed or printed name of person signing)

Mirector

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: NURAVEN INC
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
AND NO SLOWS OF POSSECTS OF FUTURE
AND NO SLOWS OF POSPECTS OF FUTURE
WOLK OR INCOME DUE TO ECONOMIC CONDITIONS.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
BOUNTON BEACH FL 33426

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

Signature of the Person Filing

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced

within 4 years after the filing of this notice.